

**LOBBYING REGISTRATION FORM**

To be used for initial registrations and renewals.

*2000*

610

Lobbyist's Registration Number

FOR OFFICE USE ONLY

Postmark Date: *12-30-99**P. 8*  
*HE 5855*  
*10/02*  
*KSP*

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**Instructions**

- Print in ink or type.
- Complete form and return with \$10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (225) 922-1400 or (800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

1. NAME GUSTE, JR. William Joseph  
Last First MI2. BUSINESSPHONE 504 - 529-7200  
Area Code and Phone Number3. BUSINESS ADDRESS 701 St. Louis Street, New Orleans, LA 70130  
Street and No. City State ZipMAILING ADDRESS Same  
Street and No. City State Zip4. EMPLOYER Self-employed5. EMPLOYER'S ADDRESS Same  
Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name Housing Authority of New OrleansAddress 918 Carondelet Street, New Orleans, LA 70130Business or purpose To provide public assisted housingDoes this person pay you? Yes

If No, who pays you? \_\_\_\_\_

# LOBBYING REGISTRATION FORM

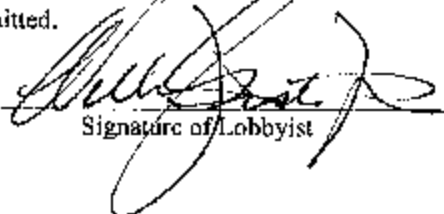
610

Lobbyist's Registration Number

2. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_
3. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_
4. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_

## CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [L.S.A.-R.S. 24:50 et seq.] has been deliberately omitted.

  
Signature of Lobbyist

